UNITED STATES DISTRICT COURT

for the DISTRICT OF PUERTO RICO CLERK'S OFFICE



COPY REQUEST FORM

Note: This request may be faxed to (787)766-5693.

| Date: | | | | | |
|---|-----------------|--|---------------------------------------|---------|--|
| Requestor's Name: | | | | | |
| Telephone Number: | | | | | |
| Case Number: | | | | | |
| Docket Numbers: | | | | | |
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| Copies Certified? | Yes | | No | | |
| Do Not write below this line, for Official Use Only | | | | | |
| Remarks | | | | | |
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| Amount | Copies | | | x \$.50 | |
| | Certified | | | x \$.50 | |
| | Total | | | | |
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| Date Processed: | Processed by: | | | | |
| Call-On date: | Contact Person: | | | | |
| Pick-Up date: | | | | | |